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7590

05/26/2004

**VOLENTINE FRANCOS, PLLC**  
**Suite 150**  
**12200 Sunrise Vally Drive**  
**Reston, VA 20191**



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(Signature)
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/075,588	02/15/2002	Hideaki Matsushita	OKI.306	9410

TITLE OF INVENTION: METHOD FOR MANUFACTURING FIELD EFFECT TRANSISTOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	08/26/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
DEO, DUY VU NGUYEN	1765	257-350000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Volentine Francos, PLLC  
2 \_\_\_\_\_  
3 \_\_\_\_\_

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Oki Electric Industry Co., Ltd. Tokyo, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

☒ Issue Fee  
☒ Publication Fee  
☒ Advance Order - # of Copies 5

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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Adam C. Volentine (Date) 8/25/2004  
33289

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

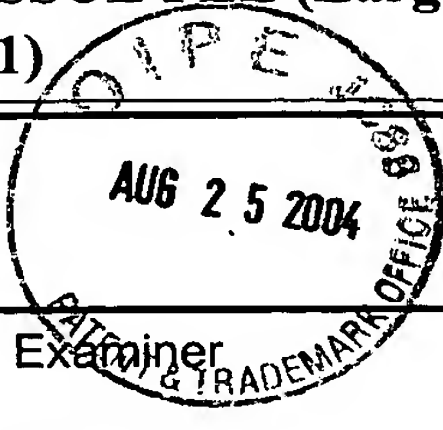

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08/26/2004 GWORDF2 00000020 10075588

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TRANSMIT THIS FORM WITH FEE(S)

<b>TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)</b> <b>(37 C.F.R. 1.311)</b>					Docket No. <b>OKI.306</b>	
Applicant(s): <b>Hideaki MATSUHASHI</b>						
						
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.	
10/075,588	02/15/2002	Deo, Duy Vu Nguyen	20987	1765	9410	
Invention: <b>METHOD FOR MANUFACTURING FIELD EFFECT TRANSISTOR</b>						
<b><u>Mail Stop Issue Fee</u></b> <b><u>COMMISSIONER FOR PATENTS</u></b> <b><u>P.O. Box 1450</u></b> <b><u>Alexandria, VA 22313-1450</u></b>						
Transmitted herewith are the following for the above-identified application.						
<input checked="" type="checkbox"/> Issue Fee Transmittal Form PTOL-85						
<input checked="" type="checkbox"/> Utility Fee: <u>    \$ 1330.00    </u> <input type="checkbox"/> Design Fee: _____ <input type="checkbox"/> Plant Fee: _____						
<input checked="" type="checkbox"/> Publication Fee: <u>    \$ 300.00    </u>						
<input checked="" type="checkbox"/> A check in the amount of <u>    \$1,645.00    </u> is attached.						
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>50-0238</u> as described below.						
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<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> Charge any additional fee required.</div><div></div></div>						
 <i>Signature</i>			Dated: <b>AUGUST 25, 2004</b>			
ADAM C. VOLENTINE REG. NO. 33289						
VOLENTINE FRANCOS, PLLC ONE FREEDOM SQUARE 11951 FREEDOM DRIVE, SUITE 1260 RESTON VA 20190 TEL. (703) 715-0870						
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